

## SCHEDULE C: Mixed Use Rental Income

<b>Property Location:</b>	<b>Mixed Use Property</b>	<b>Calendar Year:</b>
<b>Parcel ID:</b>	<b>Rental Income Statement</b>	<b>Submitted By:</b>

Commercial Lease : Please provide information on current leases as of January 1st.					Lease Terms			
Floor Level	Tenant Name	Type of Space	Leased Area (Sq. ft.)	Rent per SF on Jan. 1st	Annual Rent	Start Date (Mo/Yr.)	Term in years	Basis Gross, Net, NNN
				\$	\$			
				\$	\$			
				\$	\$			
				\$	\$			
				\$	\$			

**Residential Rental Information: Please provide the following rental information:**

Unit Type	No. of Units	Room Count		Monthly Rent		Typical Lease Term	Includes the following:
	Total	Rooms	Bathroom	Per Unit	Total	Lease or Tenant at Will (TAW)	W: Water Sewer E: Electricity Heat: Oil/Gas/Elec Other: Explain
Studio							
1 Bedroom							
2 Bedroom							
3 Bedroom							
4 Bedroom							
Garage Parking Space							
Outdoor Parking Space							

*COPY AND ATTACH ADDITIONAL PAGES (IF NEEDED)*

*Turn over for Annual I & E Summary Report ➔*

# ANNUAL INCOME AND EXPENSE SUMMARY REPORT

<b>Parcel ID:</b>		<b>Calendar Year: 2021</b>	
<b>Property Address:</b>		<b>Mailing Address:</b>	
<b>Owner:</b>		<b>City/State/Zip:</b>	
1. Primary Property Use: Apartment___ Office:___ Retail___ Industrial___ Mixed Use___ Other___			
2. Gross Building Area (Sq. feet)		6. Number of Units	
3. Net Leasable Area (Sq. feet)		7. Number of Parking Spaces	
4. Owner Occupied Area (Sq. feet)		8. Actual Year Built	
5. Common Area (Sq. feet)		9. Year Remodeled	

ANNUAL INCOME		ANNUAL EXPENSES	
10. Apartment Rentals (Sched. A)	\$	22. Advertising	\$
11. Office Rentals (Sched. B)	\$	23. Cleaning and Maintenance (Includes Snow Removal and Trash Removal)	\$
12. Retail Rentals (Sched. B)	\$	24. Commissions/Leasing Fees	\$
13. Industrial Rentals (Sched. B)	\$	25. Insurance (Building Only)	\$
14. Mixed Use Rentals (Sched. C)	\$	26. Professional & Legal Fees	\$
15. Other Rentals	\$	27. Management/Admin Fees	\$
16. Parking Rentals	\$	28. Repairs and Maintenance	\$
17. Common Area Maint. (CAM)	\$	29. Supplies	\$
18. Other Property Income (billboard, cell tower, etc.)	\$	30. Utilities (paid by owner)	\$
19. Total Potential Gross Income	\$	31. Other	\$
20. Vacancy and Collection Loss	\$	32. Reserves for Replacement	\$
21. Effective Gross Annual Income (Subtract Line 20 from Line 19)	\$	33. Total Expenses Add lines 22 to 33	\$

I certify under the pains and penalties of perjury that the information supplied herewith is true and correct

Submitted by: \_\_\_\_\_ Title: \_\_\_\_\_ Phone: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

The above identified property is owner occupied \_\_\_\_\_

The above identified property is leased to a related person, corporation, or business entity \_\_\_\_\_